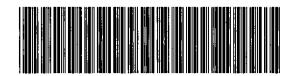
# M500007399

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cir	ty/State/Zip/Phon	e #)
·		•
PICK-UP	☐ WAIT	MAIL
<u> </u>		*
(Bu	isiness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
	511 041	
Special Instructions to	Filing Officer:	
1		





800276842188

09/16/15--01021--008 \*\*160.00

FILED

15 SEP IS PM 2:57

1. CRETARY OF STATE

IN I MANAGE FILED

SEP 1 7 2015 S. YOUNG



September 15, 2015

Sent Via: FedEx

Florida Department of State Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE: Wilson Title Agency Services, LLC; Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida

To Whom It May Concern,

On July 31, 2015, Wilson Title Agency Services, LLC was formed as a Delaware LLC. Enclosed please find the Application for Authorization to Transact Business in Florida for the authorization of Wilson Title Agency Services, LLC.

Along with the application, please find a check in the amount of \$160.00 to cover the filing fee, certificate of status and a certified. Also included is the certificate of formation for Wilson Title Agency, Services, LLC.

If you have any questions regarding the application please do not hesitate to contact me at 407-395-6899 or by email at avandebo@orangelake.com.

Sincerely,

Ashley Syrett

Legal Assistant

Orange Lake Resort 8505 W. Irlo Bronson Memorial Hwy.

ability Syreth

Kissimmee, FL 34747 T: 407.395.6899 F: 407.239.1032

AVandeBo@orangelake.com

#### **COVER LETTER**

TO:

TO:		ration Section on of Corporatio	ons ,				
SUBJI	W ECT:	ilson Title Agen	cy Services, LLC				
0000	<u> </u>			of Limited Liability	Company	.,	
The en Exister	closed "A nce, and c	application by Fo heck are submitt	oreign Limited Liability Co ed to register the above ref	mpany for Authoriz ferenced foreign lim	ation to Tr ited liabilit	ansact Business in Florida," C y company to transact busines	ertificate of s in Florida
Please	return all	correspondence	concerning this matter to t	he following:			
		Ashley Syrett					
				Name of Person			
		Orange Lake (	Country Club				
			·	Firm/Company			
		8505 West Irle	Bronson Memorial Highv	way			
				Address		The state of the s	•
		Kissimmee, Fl	L 34747			5.0.13	
			_	/State and Zip Code		V. 2. 0	) (1)
	-	avandebo@oran					:
For fur	ther infor	mation concernir	E-mail address: (to be using this matter, please call:	sed for future annua	l report no	tification)	5
	Ashley	Syrett		407 at (	395-68 _)	99	
		Name	of Contact Person	Area Code	Day	time Telephone Number	
	Division Registra P.O. Bo	NG ADDRESS: n of Corporation: ation Section ex 6327 ssee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle ee, FL 32301	
Enclose		eck for the follow .00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filia Certified Copy	ng Fee &	■ \$160.00 Filing Fee, Certion of Status & Certified Copy	ficate

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA;

1. Wilson Title Agency Se	ervices, LLC eign Limited Liability Company; mu	,			
(Name of Fore	eign Limited Liability Company; mu	st inclu	ide "Limited Liab	ility Company," "L.L.C.," o	r "LLC.")
iability Company," "L.L.C,"	ternate name adopted for the purpos " or "LLC.")	e of tra	msacting business	s in Florida. The alternate na	me must include "Limited
Delaware		3.	47-4693378		
(Jurisdiction under the law company is organized)	of which foreign limited liability			(FEI number, if applicable	E)
·	(Date first transacted busine (See sections 605.0904 & 605	ss in F	lorida, if prior to	registration.)	
8505 West Irlo Bronso		.0905,	F.S. to determine	penalty liability)	
Kissimmee, FL 34747					<del></del>
	(Street Address of	Princip	al Office)		_
8505 West Irlo Bronson	n Memorial Highway				
Kissimmee, FL 34747					Fig. a. n.
<del></del>	(Mailing	Addres	s)		
. Name and street addres	s of Florida registered agent: (P	.O. Bc	x <u>NOT</u> accepts	able)	源 面流
Name:	NRAI Services, Inc.			_	图象 基 口
Office Address:	1200 South Pine Island Road			-	25
	Plantation			, Florida 33324	
Registered agent's accep	(City)		-	(Zip code)	_
lesignated in this applicate complywith the provision	gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent.	tment	as registered at	gent and agree to act in t	his capacity. I further agi
	Zileen Chaple	2			
	Eileen Chaddock, Spe		ent's signature) L'Asst. Se	cretary	_
B. The name, title or capa	ncity and address of the person(s)	who l	has/have author	ity to manage is/are:	
Wilson Title Services, LL	C -Member				
3505 West Irlo Bronson N	demorial Highway				
Kissimmee, FL 34747					
	of existence, no more than 90 da of which it is organized. (If the c abmitted)				
	Signature	of an	authorized person		
	in accordance with section 605.6 the Department of State constitu	0203 (	1) (b), Florida S	Statutes. I am aware that a	
	John C. A		_	•	<b>,</b> •

Typed or printed name of signce

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF FORMATION OF "WILSON TITLE AGENCY

SERVICES, LLC", FILED IN THIS OFFICE ON THE THIRTY-FIRST DAY OF

JULY, A.D. 2015, AT 10:41 O'CLOCK A.M.



5795223 8100

151117705

AUTHENTICATION: 2611915

DATE: 08-03-15

You may verify this certificate online at corp.delaware.gov/authver.shtml